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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------|------------------------------------------------|----------------------------------------------------------------|--|
| [ TF                                                                                                                                                                                                                                                                                                          | RANSMITTAL               | Filing Date                                             | 10 Augus                                       | 10 August 2001                                                 |  |
|                                                                                                                                                                                                                                                                                                               | FORM                     | First Named Inventor                                    | Timothy I                                      | Timothy P. Tully                                               |  |
|                                                                                                                                                                                                                                                                                                               |                          | Art Unit                                                | 1617                                           |                                                                |  |
| (to be used for all correspondence after initial filing)                                                                                                                                                                                                                                                      |                          | Examiner Name                                           | Yong So-                                       | c Chong                                                        |  |
|                                                                                                                                                                                                                                                                                                               |                          | Attorney Docket Number                                  | 17VV-13                                        | 7270                                                           |  |
| Total Number of Pages in This Submission   20   1/7VV-13/2/0                                                                                                                                                                                                                                                  |                          |                                                         |                                                |                                                                |  |
| ENCLOSURES (Check all that apply)                                                                                                                                                                                                                                                                             |                          |                                                         |                                                |                                                                |  |
| Fee Tran                                                                                                                                                                                                                                                                                                      | smittal Form             | Drawing(s)                                              |                                                | After Allowance Communication to TC                            |  |
|                                                                                                                                                                                                                                                                                                               | ee Attached              | Licensing-related Papers                                |                                                | Appeal Communication to Board<br>of Appeals and Interferences  |  |
| Amendm                                                                                                                                                                                                                                                                                                        | ent/Reply                | Petition Petition to Convert to a                       |                                                | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |  |
| ✓ A                                                                                                                                                                                                                                                                                                           | fter Final               | Provisional Application                                 | rovisional Application Proprietary Information |                                                                |  |
|                                                                                                                                                                                                                                                                                                               | ffidavits/declaration(s) | Power of Attorney, Revocati<br>Change of Correspondence | On<br>Address                                  | Status Letter                                                  |  |
|                                                                                                                                                                                                                                                                                                               |                          | Terminal Disclaimer                                     | Mudiess                                        | Other Enclosure(s) (please Identify                            |  |
| Extension                                                                                                                                                                                                                                                                                                     | of Time Request          |                                                         |                                                | Request for Continued Examination:                             |  |
| Express.                                                                                                                                                                                                                                                                                                      | Abandonment Request      | Request for Refund                                      |                                                | Applicant Initiated Interview Request Form;                    |  |
| Information Disclosure Statement                                                                                                                                                                                                                                                                              |                          | CD, Number of CD(s)                                     |                                                |                                                                |  |
| Landscape Table on CD                                                                                                                                                                                                                                                                                         |                          |                                                         |                                                |                                                                |  |
| Certified Copy of Priority Remarks Document(s)                                                                                                                                                                                                                                                                |                          |                                                         |                                                |                                                                |  |
| Reply to Missing Parts/                                                                                                                                                                                                                                                                                       |                          |                                                         |                                                |                                                                |  |
| Incomplete Application Reply to Missing Parts                                                                                                                                                                                                                                                                 |                          |                                                         |                                                |                                                                |  |
| under 37 CFR 1.52 or 1.53                                                                                                                                                                                                                                                                                     |                          |                                                         |                                                |                                                                |  |
|                                                                                                                                                                                                                                                                                                               |                          |                                                         |                                                |                                                                |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT                                                                                                                                                                                                                                                                    |                          |                                                         |                                                |                                                                |  |
| Firm Name Sheppard, Mullin, Richler & Hampton LLP                                                                                                                                                                                                                                                             |                          |                                                         |                                                |                                                                |  |
| Signature Signature                                                                                                                                                                                                                                                                                           |                          |                                                         |                                                |                                                                |  |
| Printed name Don J. Pello                                                                                                                                                                                                                                                                                     |                          |                                                         |                                                |                                                                |  |
| Date 30 June 2009                                                                                                                                                                                                                                                                                             |                          |                                                         | Reg. No                                        | 33,754                                                         |  |
|                                                                                                                                                                                                                                                                                                               |                          |                                                         |                                                |                                                                |  |
| CERTIFICATE OF TRANSMISSION/MAILING                                                                                                                                                                                                                                                                           |                          |                                                         |                                                |                                                                |  |
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. |                          |                                                         |                                                |                                                                |  |
| Signature                                                                                                                                                                                                                                                                                                     |                          |                                                         |                                                |                                                                |  |
| Typed or printed name                                                                                                                                                                                                                                                                                         |                          |                                                         |                                                | Date                                                           |  |
|                                                                                                                                                                                                                                                                                                               |                          |                                                         |                                                |                                                                |  |

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